

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	2/1/10
FORMALITY REVIEW	AM	896	02/27/01
RESPONSE FORMALITY REVIEW	lt	97	5-24-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	02/11/01
2	✓	✓	"
3	✓	✓	"
4	✓	✓	"
5	✓	✓	"
6	✓	✓	"
7	✓	✓	"
8	✓	✓	"
9	✓	✓	"
10	✓	✓	"
11	✓	✓	"
12	✓	✓	"
13	✓	✓	"
14	✓	✓	"
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46	✓	✓	"
47	✓	✓	"
48	✓	✓	"
49	✓	✓	"
50	✓	✓	"

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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AA 02/27/01